



Board of Mineral Mining Examiners
Fontaine Research Park
900 Natural Resources Drive
P.O. Box 3727
Charlottesville, VA 22903-0723
(434) 951-6310

Application For Certification Examination

Applicants for certification must complete this form and submit a \$10 fee for each exam. Type or print the application in ink and pay the fee with a certified check, cashier's check, or money order made payable to the **Treasurer of Virginia**. Cash will be accepted if paid in person. Submit the application and fee to **the Board of Mineral Mining Examiners** at least **five working days** prior to the date of examination.

1. Full Name: _____ S.S. #: _____

2. Address: _____
Street or P.O. Box City State Zip Code

3. Date of Birth: _____ Home Phone No.: () _____
Month/Day/Year

4. Total years employed at a mineral mine: _____
Underground Surface

5. List your current (or most recent) mining experience:

Company Name: _____

Address: _____
Street or P.O. Box City State Zip Code

Job Title: _____ From : _____ To: _____
Month/Day/Year Month/Day/Year

6. I have attached a copy of my valid first aid card or MSHA Form 5000-23, the degrees to be used for credit toward the experience requirements , and payment for the exam.

7. Examination Requested (Check One):

- ☐ Mine inspector (DMME employed) ☐ Mineral mining electrician ☐ Surface blaster
☐ Surface foreman ☐ Surface foreman - open pit ☐ Underground foreman
☐ Underground mining blaster

8. Exam requested at _____ on _____ (refer to exam schedule)
Location Date

I hereby certify that the above answers are true to the best of my knowledge and belief.

Signed: _____ Date: _____